



Pat Quinn, Governor
Julie Hamos, Director

Illinois Department of Healthcare and Family Services

Greetings from HFS Director Julie Hamos

Welcome to the second edition of *HFS E-news*. This *HFS E-news* is being published periodically to keep you updated on program changes. To register for future editions, please visit [HFS E-news Online Registration](http://www.hfs.illinois.gov/enews) or download for others who might be interested by visiting: [hfs.illinois.gov/enews](http://www.hfs.illinois.gov/enews)

Thank you,
Julie Hamos

Medicaid Budget Payment Policies for Providers

The FY12 final Medicaid and Medical Assistance budget has a \$1.7 billion unfunded budget gap that will result in a continued pattern of deferring payment of bills for all Medicaid providers. In addition, for the period from July-December, with limited resources to pay all outstanding FY11 bills for the state, the Comptroller has notified HFS it will pay bills only up to certain dollar limits. HFS has developed payment policies that attempt to be fair and reasonable for our much-valued Medicaid providers. Please visit [Medical Assistance Budget Management Policies \(pdf\) to view a copy of these policies.](#)

Illinois Cares Rx Changes on September 1st

Illinois Cares Rx (ICRx) is the state program that offers pharmaceutical assistance, as a complement to the federal Medicare Part D programs, for seniors and the disabled. In response to Illinois' budget deficit, a new state law authorizes the continuation of ICRx, but only at 50% of previous levels. The state will continue to pay the monthly premiums to maintain Medicare Part D prescription drug coverage, but the co-pays for individual prescriptions will be increased, and the income limit has been reduced to 200% of the Federal Poverty Level (\$21,780 for an individual). For more information, read this [Fact Sheet on Illinois Cares Rx.pdf](#).

Some seniors and disabled persons impacted by the changes to the program may qualify for Extra Help, a subsidy for low-income beneficiaries of Medicare Part D, by applying to:

<http://www.ssa.gov/prescriptionhelp/>. Assistance is also available through a strong network of Senior Health Assistance Program offices at <http://www.state.il.us/aging/1directory/SHAP.pdf> and information about possible discounted prescriptions is available through <http://www.rxassist.org/>.

Coordinated Care Plan and Timetable Announced

In response to HFS' Policy Paper on Coordinated Care, we received 76 responses from a full range of

providers, managed care companies, social service and advocacy organizations. This demonstrates active community interest in testing new coordinated service delivery systems. In addition, the Medicaid Advisory Committee has organized a subcommittee on Care Coordination, which has begun to explore outstanding issues that need to be addressed.

In partnership with sister agencies, HFS is developing Phase I of the Innovations Project in order to test community interest and capacity to provide alternative models of delivering care. The Innovations Project solicitation process is expected to be announced by year end 2011, with a timeline that provides 4-5 months for potential care coordination entities to submit proposals. Phase II is envisioned to increase care coordination on a much larger scale, and will begin in summer 2012. For more information, follow the Coordinated Care link on the HFS Web site, and read the [Care Coordination Plan and Timetable.pdf](#).

Mental Health Drug Records Available for Better Care

[Public Act 097-0515](#), SB1234 amends the Mental Health and Developmental Disabilities Confidentiality Act to allow any medical professional, from whom a Medicaid recipient seeks care, to have access to pharmaceutical records for that recipient, including those related to pharmaceuticals prescribed for a mental illness or disorder. All disclosures must be in a manner consistent with state and federal laws, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Previously, medical providers were permitted access to pharmaceutical records related to mental health diagnoses only in the event of emergency treatment, and only at the sole discretion of the prescribing therapist or with the explicit consent of each individual patient. That restriction diminished the quality of care for patients, and created a potentially perilous situation for physicians and patients alike. Mental health drugs can pose significant danger of drug interactions, unintended polypharmacy or contraindicated by certain physical ailments. Under the new law, all treating physicians of a Medicaid patient will have access to pharmaceutical information – critical for coordinating the care of the patient. View [Public Act 097-0515](#).

Hospital Rate Reform Initiative Underway

HFS has already begun the process for restructuring and modernizing the payment methodology for Medicaid inpatient and outpatient hospital rates. Two public meetings, a Webinar and the first meeting of the Technical Advisory Group, have been held. To view any of the presentations and Provider Cost Calculation Review Instructions, follow the [Hospital Rate Reform Initiative](#) Web Page on the HFS Web site.

Partners in Action Online Conference Announced

September 26 – 28, the Illinois Public Health Institute is hosting its annual Partners in Action Conference in an experimental new format: entirely online. Participants will be able to watch and interact from their own desks. The purpose of the conference is to advance strategies for collaborative, multi-sectoral best practices for addressing state and local health priorities in Illinois. The focus is on evidence-based practices targeting social determinants of health, reducing

chronic disease by improving nutrition and physical activity, and behavioral health issues focusing on violence, mental health and substance abuse. To register, visit the conference link at www.iphionline.org.

Please feel free to ask questions or share comments by e-mailing: hfs.webmaster@illinois.gov.